

PTO/SB/05 (03-01)

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UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No.

First Inventor

PROTECTIVE IMPLEMENT

Title

APPLICATION ELEMENTS S e MPEP chapter 600 concerning utility patent application contents. S e MPEP chapter 600 concerning utility patent application contents. 1.	(Only for new nonprovision	nal applications under 37 CFR 1.53(b))	E.	xpress	Mail Label No.		<u> </u>	
Se eMEP chapter 600 concerning utility patient application contents. Section Sect	APPLICATION ELEMENTS			ADD				
Computer Program (Appendix) 2.			ts.					
Application Data Sheet. See 37 CFR 1.76 17. Other: 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No. Prior application information: Examiner: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 55, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number or Bar Code Label #603, 3-2-2 Izuka, Address City Kawaguchi-shi, State Saitama Zip Code 332-0023 Country Japan Telephone 03 5993 6816 Fax 03 5993 6817 Name (Print/Type) Atsushi Tai Registration No. (Attorney/Agent)	Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. Specification (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description - Claim(s) - Abstract of the Disclosure Drawing(s) (35 U.S.C. 113) [Total Sheets						e table or submission ss); or pove copies DN PARTS document(s)) Power of Attomey applicable) Copies of IDS Citations 503) nt(s) U.S.C. 122	
or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number or Bar Code Label #603, 3-2-2 Izuka, Address City Kawaguchi-shi, State Saitama Zip Code 332-0023 Country Japan Telephone 03 5993 6816 Fax 03 5993 6817 Name (Print/Type) Atsushi Tai Registration No. (Attomey/Agent)	6 Application Date Shoot See 27 CED 4.76							
Customer Number or Bar Code Label Name Atsushi TAI #603, 3-2-2 Izuka, Address City Kawaguchi-shi, Japan Telephone O3 5993 6816 Fax O3 5993 6817 Registration No. (Attomey/Agent)	or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.:/ Prior application information: Examiner: Group Art Unit: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.							
Name Atsushi TAI #603, 3-2-2 Izuka, Address City Kawaguchi-shi, State Saitama Zip Code 332-0023 Country Japan Telephone 03 5993 6816 Fax 03 5993 6817 Name (Print/Type) Atsushi Tai Registration No. (Attorney/Agent)								
#603, 3-2-2 Izuka, Address City Kawaguchi-shi, State Saitama Zip Code 332-0023 Country Japan Telephone 03 5993 6816 Fax 03 5993 6817 Name (Print/Type) Atsushi Tai Registration No. (Attorney/Agent)	Customer Number or Ber Co) bajaka	ទៅ <i>ទៅរដ្ឋា</i> វ៉ាន់	or 🗸	Correspon	dence ad	ddress below
Address City Kawaguchi-shi, State Saitama Zip Code 332-0023 Country Japan Telephone 03 5993 6816 Fax 03 5993 6817 Name (Print/Type) Atsushi Tai Registration No. (Attorney/Agent)	Name	Atsushi TAI						
City Kawaguchi-shi, State Saitama Zip Code 332-0023 Country Japan Telephone 03 5993 6816 Fax 03 5993 6817 Name (Print/Type) Atsushi Tai Registration No. (Attorney/Agent)		#603, 3-2-2 Izuka,						
City Kawaguchi-shi, State Saitama Zip Code 332-0023 Country Japan Telephone 03 5993 6816 Fax 03 5993 6817 Name (Print/Type) Atsushi Tai Registration No. (Attorney/Agent)	Address	3650						
Name (Print/Type) Atsushi Tai Registration No. (Attorney/Agent)		Kawaguchi-shi,	Si	tate	Saitama	Zip C	Code	332-0023
Name (Finite type) Registration No. (Attorney/Agent)	Country	Japan -	Teleph	one	03 5993 6816	Fá	X	03 5993 6817
	Name (Print/Type)	Atsushi Tai		Regi	stration No. (Attorne	ey/Agent)		
	Signature	Atsushi Tai Date 12/25/2001				25/2001		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

PTO/SB/21 (08-00)
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			Application Numb	er	·		
TRANSMITTAL FORM		Filing Date					
		First Named Inven		Atsushi Tai			
(to be used for all correspondence after initial filing)		Group Art Unit		<u> </u>			
	•		Examiner Name				
Total Number of	Pages in This Submi	ssion 1	Attorney Docket Nu	umber			
ENCLOSURES (check all that apply)							
Fee Transmittal Form Fee Attached Drawing Licensin After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement		reg-related Papers to Convert to a nal Application of Attorney, Revocation of Correspondence		After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please identify below):			
	SIGNATU	RE OF APPLI	CANT, ATTORNEY,	, OR AG	SENT		
Firm or Individual name Atsushi Tai Signature Atsushi Tai Date 12/25/2001							
CERTIFICATE OF MAILING							
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:							
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Patent fees are subject to annual revision.

TOTAL	AMOUNT	OF P	AYMENT
IVIAL	WILL ON THE	∵ : :	~ 1 161 - 14 1

(\$)	500.00

Complete if Known			
Application Number			
Filing Date			
First Named Inventor	Atsusni Tai		
Examiner Name			
Group Art Unit			
Attorney Docket No.			

METHOD OF PAYMENT	FEE CALCULATION (continued)				
1. The Commissioner is hereby authorized to charge indicated focus and small any even authorized to charge	3. ADDITIONAL FEES				
indicated fees and credit any overpayments to: Deposit	Large Small	1			
Account	Entity Entity Fee Fee Fee Fee Fee Fee Fee Fee	- Dalai			
Number	Fee Fee Fee Fee Fee Description Fee Code (\$) Code (\$)	e Paid			
Deposit Account Name	105 130 205 65 Surcharge - late filing fee or oath	 -			
Name Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet	30.00			
Applicant claims small entity status.	139 130 139 130 Non-English specification	30.00			
See 37 CFR 1.27	147 2,520 147 2,520 For filing a request for ex parte reexamination	-			
2. Payment Enclosed: Check Credit card Money Other	112 920* 112 920* Requesting publication of SIR prior to Examiner action				
FEE CALCULATION	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action				
	115 110 215 55 Extension for reply within first month				
Large Entity Small Entity	116 400 216 200 Extension for reply within second month				
Fee Fee Fee Fee Description	117 920 217 460 Extension for reply within third month				
=	118 1,440 218 720 Extension for reply within fourth month				
101 740 201 370 Utility filing fee 370.00 106 330 206 165 Design filing fee	128 1,960 228 980 Extension for reply within fifth month				
107 510 207 255 Plant filing fee	119 320 219 160 Notice of Appeal				
107 310 207 233 Flant filing fee	120 320 220 160 Filing a brief in support of an appeal				
114 160 214 80 Provisional filing fee	121 280 221 140 Request for oral hearing				
	138 1,510 138 1,510 Petition to institute a public use proceeding				
SUBTOTAL (1) (\$) 370.00	140 110 240 55 Petition to revive - unavoidable				
2. EXTRA CLAIM FEES	141 1,280 241 640 Petition to revive - unintentional				
Extra Claims below Fee Palc	78 · · · · · · · · · · · · · · · · · · ·				
Total Claims -20** = X = Independent	143 460 243 230 Design issue fee	-			
Claims - 3	144 620 244 310 Plant issue fee	-			
Multiple Dependent	122 130 122 130 Petitions to the Commissioner	\longrightarrow			
	123 50 123 50 Processing fee under 37 CFR 1.17(q)	\longrightarrow			
Large Entity Small Entity Fee Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt				
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)				
102 84 202 42 Independent claims in excess of 3	146 740 246 370 Filling a submission after final rejection				
104 280 204 140 Multiple dependent claim, if not paid	(37 CFR § 1.129(a)) 149 740 249 370 For each additional invention to be				
109 84 209 42 ** Reissue independent claims over original patent	examined (37 CFR § 1.129(b))	-			
110 18 210 9 ** Reissue claims in excess of 20	179 740 279 370 Request for Continued Examination (RCE)	——			
and over original patent	169 900 169 900 Request for expedited examination of a design application				
SUBTOTAL (2) (\$)	Other fee (specify)				
**or number proviously paid, if greater For Paiesups, san above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 130.0	00			

SUBMITTED BY				Complete (if applicable)		
Name (Print/Type)	Atsushi Tai	Registration No. (Atturney/Agent)	Telephone	+81 3 5993 6816		
Signature	Atsushi Tai		Date	12/25/2001		

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